

**Maine Rostered Guardian *ad litem* Professional Continuing Education Requirement Form  
2009**

**Failure to comply with Rule II (2) (E) of The Rules for Guardians *ad litem*, will result in removal from the  
Guardian Roster**

**NAME:** \_\_\_\_\_

Please print clearly

**ADDRESS:** \_\_\_\_\_

\* Is this an address change? ☐ No ☐ Yes

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

\* Is this a new email address? ☐ No ☐ Yes

**Professional License(s) held:** \_\_\_\_\_ **Number #:** \_\_\_\_\_

**Expiration date:** \_\_\_\_\_

**I.** Between July 1, 2008 and June 30, 2009, did you attend:

(The programs below have been pre-approved for GAL continuing education credits)

- a. GAL CORE training 9/29 to 10/3/08? ☐ No ☐ Yes
- b. Informed Consent and Refusal of Care in Title 19-A & Title 22 Cases? - 7/10/08 or 9/10/08 1.0 Credits ☐ No ☐ Yes
- c. Representing Parents in Cases Where Sexual Abuse is an Issue? 8/22/08 Video replay - 3.25 GAL Credits ☐ No ☐ Yes
- d. Family Law Trail Advocacy Video Replays? 8/28/08- 3.0 GAL Credits ☐ No ☐ Yes
- e. Maine Summit for Grandfamilies? 9/26/08 - 5.0 GAL Credits ☐ No ☐ Yes
- f. Tools for Working with Highly Challenged Clients: Axis 11? 10/3/08 - 6.0 GAL Credits ☐ No ☐ Yes
- g. Batterer Accountability: A Practical Toolbox for the Child Welfare System? 10/6/08 - 6.0 GAL Credits ☐ No ☐ Yes
- h. The Impact of Domestic Violence on Children? 10/20/08 – 2.0 GAL Credits
- i. Regional Fall/Winter 2008-2009 Court Forum: Competent Child Advocacy? – 3.0 GAL Credits ☐ No ☐ Yes: Date & Location: \_\_\_\_\_
- j. Domestic Violence & Predominant Aggressors Training? 1/7/09 – 4.0 GAL Credits ☐ No ☐ Yes
- k. Separation, Divorce and the Very Young Child? 3/9/09 – 2.0 GAL Credits ☐ No ☐ Yes
- l. For Kids' Sake Brown Bag? 4/29/09 – 3 GAL Credits ☐ No ☐ Yes
- m. Separation, Divorce and the Adolescent? 4/30/09 – 1.5 GAL Credits ☐ No ☐ Yes
- n. Special Education: Understanding Your Rights & Getting Results? – 5.0 GAL Credits ☐ No ☐ Yes: Date & Location: \_\_\_\_\_
- o. Maine Guardian *ad litem* Institute Domestic Violence Training? 5/8/09 - 4 GAL Credits ☐ No ☐ Yes

**II.** Did you attend other training which you would like considered to fulfill your GAL continuing education requirement and which involved any of the following: Title 19-A or Title 22, dynamics of divorce and its effect on children, child development, the effects of trauma on children, substance abuse, legal issues and processes, the duties and obligations of the Guardian as an agent of the court, or interviewing techniques?

☐ No.

☐ Yes. If you answer yes, you must complete the applicable section on the reverse page.

**III.** Did you attend a training approved by the Chief Judge at a reduced cost as a result of agreeing to accept Title 19-A pro bono cases or agreeing to accept cases on a reduced fee basis?

☐ No.

☐ Yes. If you answer yes, you must complete the applicable section on the attached page.

**IV.** Since your date of rostering have you been: 1) removed, suspended, reprimanded or otherwise been the subject of any other discipline or sanction by a licensing board, professional neutral organization, other professional organization, court or governmental tribunal, or 2) been convicted of a crime, or 3) been the subject of any substantiated DHHS case, or 4) had a written complaint filed with regard to your role as a Guardian *ad litem*

☐ No.

☐ Yes. If you answer yes, you must complete the applicable section on the attached page.

☐ I am not completing this form, because I no longer wish to serve as a Guardian.

Please remove my name from the GAL Roster.

I certify that the above information is true,

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature



**I. Title of Professional Education Program(s) attended between July 1, 2008 – June 30, 2009.**

A. \_\_\_\_\_

Brief summary of relevant content: \_\_\_\_\_

\_\_\_\_\_

Program sponsor \_\_\_\_\_ Date: \_\_\_\_\_ Hours: \_\_\_\_\_

B. \_\_\_\_\_

Brief summary of relevant content: \_\_\_\_\_

\_\_\_\_\_

Program sponsor \_\_\_\_\_ Date: \_\_\_\_\_ Hours: \_\_\_\_\_

**II. Title 19-A Pro bono/Reduced fee cases:**

Name of Case \_\_\_\_\_.

Court location and docket number \_\_\_\_\_.

Basis of appointment: ☐ pro bono ☐ reduced fee

Name of Case \_\_\_\_\_.

Court location and docket number \_\_\_\_\_.

Basis of appointment: ☐ pro bono ☐ reduced fee

**III.** Please provide full details of any discipline or other sanction by any licensing board, professional organization, or court, governmental tribunal: \_\_\_\_\_

(Use additional sheets if necessary).

**IV.** Please provide full details of any criminal convictions:

\_\_\_\_\_

(Use additional sheets if necessary).

Please provide full details of any matter in which you were the subject of a substantiated DHHS case:

\_\_\_\_\_

(Use additional sheets if necessary).

**VI.** Please provide full details of any Guardian *ad litem* complaint you were subject to. \_\_\_\_\_

\_\_\_\_\_

For future planning purposes, are there continuing education subject areas that you would be interested in attending?

\_\_\_\_\_

I certify that the above information is true,

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

**Please return this completed form by June 30, 2009**  
To: Administrative Office of the Courts/Family Division  
171 State House Station, Augusta, ME 04333-0171